

<b>MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET</b> Substitute for Form PTO-1360 (For use with Form PTO/SB/06)				Application Number 10/522,068		Filing Date 21 January, 2005		<input type="checkbox"/> To be Mailed					
				Applicant(s) WADLEY, HAYDN N.G.						Page 1 of 1			
* May be used for additional claims or amendments													
CLAIMS	AS FILED 03/09/2009		AFTER FIRST AMENDMENT		AFTER SEC. AMENDMENT		*			*		*	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1	1						51						
2		1					52						
3		2					53						
4		2					54						
5		2					55						
6		2					56						
7		-					57						
8		-					58						
9		-					59						
10		2					60						
11		2					61						
12		-					62						
13		-					63						
14		2					64						
15		2					65						
16		2					66						
17		2					67						
18		2					68						
19		2					69						
20		2					70						
21		2					71						
22		-					72						
23		2					73						
24		2					74						
25		2					75						
26		2					76						
27		2					77						
28		2					78						
29		2					79						
30		2					80						
31		2					81						
32		2					82						
33		1					83						
34		1					84						
35		1					85						
36		-					86						
37		-					87						
38		-					88						
39		-					89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
Total Indep	1						Total Indep						
Total Depend		52					Total Depend						
Total Claims		53					Total Claims						

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